

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS		10/27
Q.I.P.E. CLASSIFIER	13		10/28/90
FORMALITY REVIEW	604117		11-4-90

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4/12/26
2	✓	✓	4/15/27
3	✓	✓	4/15/27
4	✓	✓	4/15/27
5	✓	✓	4/15/27
6	✓	✓	4/15/27
7	✓	✓	4/15/27
8	✓	✓	4/15/27
9	✓	✓	4/15/27
10	✓	✓	4/15/27
11	✓	✓	4/15/27
12	✓	✓	4/15/27
13	✓	✓	4/15/27
14	✓	✓	4/15/27
15	✓	✓	4/15/27
16	✓	✓	4/15/27
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25	✓	✓	4/15/27
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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